

9-13-85  
ASAP 1-2h LATER

WPI  
LATER

9-13-85  
Approved  
S. Abel

# PERMIT

P 35961  
A 34738

## SEWAGE DISPOSAL SYSTEM

### MARYLAND STATE DEPARTMENT OF HEALTH\*

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
992-2330

03-308952  
INDEXED

ELLICOTT CITY  
DISTRICT 3rd  
DATE 9/5/85

Paul Schissler IS PERMITTED TO INSTALL X ALTER

ADDRESS \_\_\_\_\_ PHONE 875-4197

SUBDIVISION Boswell Property ROAD 11745 11805 Route 99 LOT 8

PROPERTY OWNER B & H Construction (~~ALVIN STARR~~) TOM DEVORE  
(2/93)

ADDRESS \_\_\_\_\_

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES \_\_\_\_\_ NO X

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 158 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION: Start trench 215 feet from the 355.96 ft. lot line and 25 feet from the 330 ft. lot line. Run trench on level ground toward Route 99 or 355.96 ft. lot line. If second trench needed, place trench 10-12 feet from first trench toward 600 ft. lot line. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

OH/SA

9-13-85 Well Line 4.5'-5' below GRADE.

PIPES AT 4.5' below GRADE; NO PRESSURE TANK Installed S. Abel

PLANS APPROVED BY Sid Abel DATE 1/18/85

COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

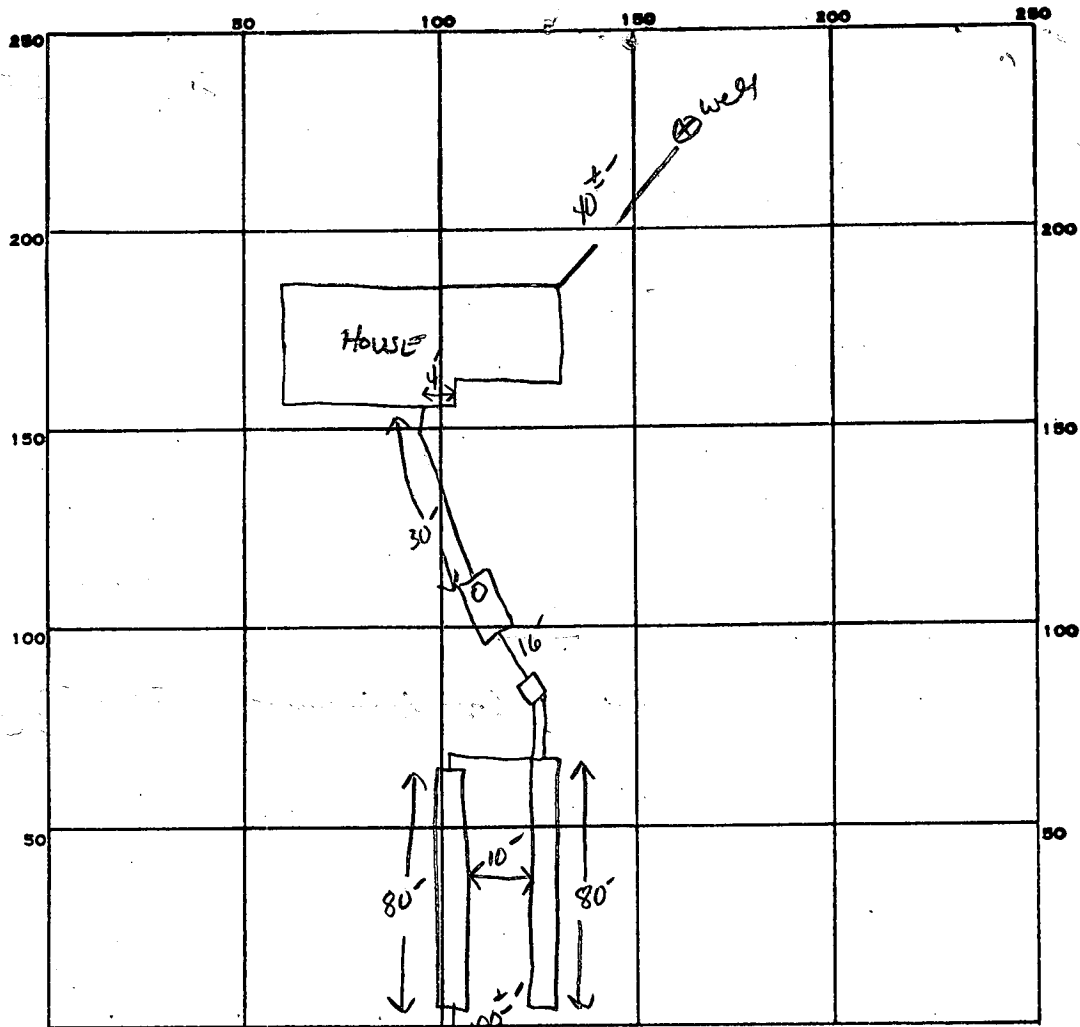
PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

\*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

A  
9/14/85



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

RT 99

PERMIT CARD

SEPTIC TANK, LEVEL ✓ 1500 GA

CLEANOUTS ✓ 51

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 8 8 FT. TRENCH WIDTH 2 FT. INLET 4"

GRAVEL DEPTH 4 4 IN. TOTAL LENGTH 80 80 FT. 160 TOTAL

NUMBER OF TRENCHES 2 ONE SIDE WALL TOTAL BOTTOM AREA 640

SEEPAGE PITS, INSIDE DIAMETER \_\_\_\_\_ FT. DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA 640 SQ. FT.

REMARKS 9-13-85 OK TO ADD STONE TO TRENCHES SA

DATE SYSTEM APPROVED

9-13-85

INSPECTOR

SAW

SUBDIVISION: MICHAEL DOSWELL  
RT 99

LOT NUMBER: 8

DRY WELL OR DRY WELL AND TRENCH

		_____ sq. ft./bedroom
	<u>Septic Tank</u>	<u>Minimum Total square Feet</u>
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet \_\_\_\_\_ feet below original grade.  
 Bottom maximum depth \_\_\_\_\_ feet below original grade.  
 Effective area begins at \_\_\_\_\_ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with \_\_\_\_\_ feet of stone below distribution pipe.

TRENCHES

158 sq. ft./bedroom

Trench to be 2 wide.  
 Inlet 4 feet below original grade.  
 Bottom maximum depth 8 feet below original grade.  
 Effective area begins at 4 feet below original grade.  
4 feet of stone below distribution pipe.

- NOTE:
- (1) No trench to exceed 100 feet in length.
  - (2) If more than one trench used, a distribution box is required.
  - (3) Trenches to be installed on level ground.
  - (4) Call for inspection of trench before gravel is installed.
  - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
  - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: START TRENCH 215 FT FROM THE 355.96 FT LOT LINE AND 25 FT FROM THE 330 FT LOT LINE. RUN TRENCH ON LEVEL GROUND TOWARD RT 99 OR 355.96 FT LOT LINE. IF SECOND TRENCH NEEDED PLACE TRENCH 10-12 FT FROM FIRST TRENCH TOWARD 600 FT LOT LINE.

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 34738  
P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

DISTRICT \_\_\_\_\_  
DATE 4/3/85

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Michael D. Boswell  
ADDRESS 11785 RT 99 PHONE 465-8579

PROPERTY LOCATION:  
SUBDIVISION Boswell Property LOT NO. 5 8  
ROAD AND DESCRIPTION 11775 - 11825 RT 99 near Sand Hill Rd & Henryton Rd. off RT 99  
SIZE OF LOT 9.65 TYPE BLDG. - (NUMBER OF BEDROOMS)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Michael D. Boswell  
(SIGNATURE OF APPLICANT)

APPROVED BY C Wilton FOR 6/5/85 TRENCHES DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 1-18-85 Perc. OK, hold for certified hole plat 87A/RT

OLD PERMIT SIGNED  
AND RETURNED 8/10/85  
# 66133 for SPV

# THIS IS NOT A PERMIT



# APPLICATION

SEWAGE DISPOSAL TESTING

A 34738

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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HOWARD COUNTY HEALTH DEPARTMENT  
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PROPERTY OWNER Michael D. Boswell

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PROPERTY LOCATION:

SUBDIVISION Boswell Property LOT NO. 5 8

ROAD AND DESCRIPTION 11775 - 11825 RT 99 near Sand Hill Rd  
Hewytan Rd. off RT 99

SIZE OF LOT 9.65 TYPE BLDG. \_\_\_\_\_  
(NUMBER OF BEDROOMS)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Michael D. Boswell  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

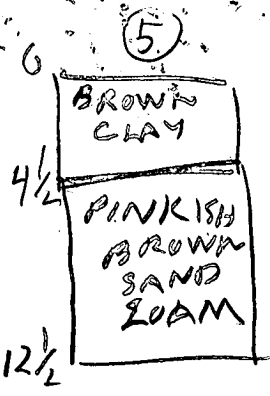
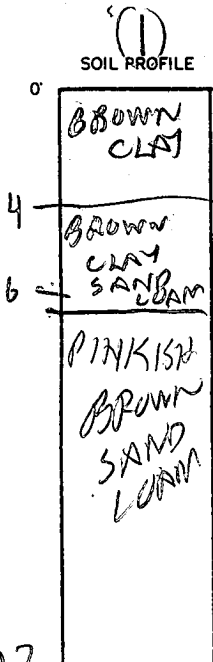
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

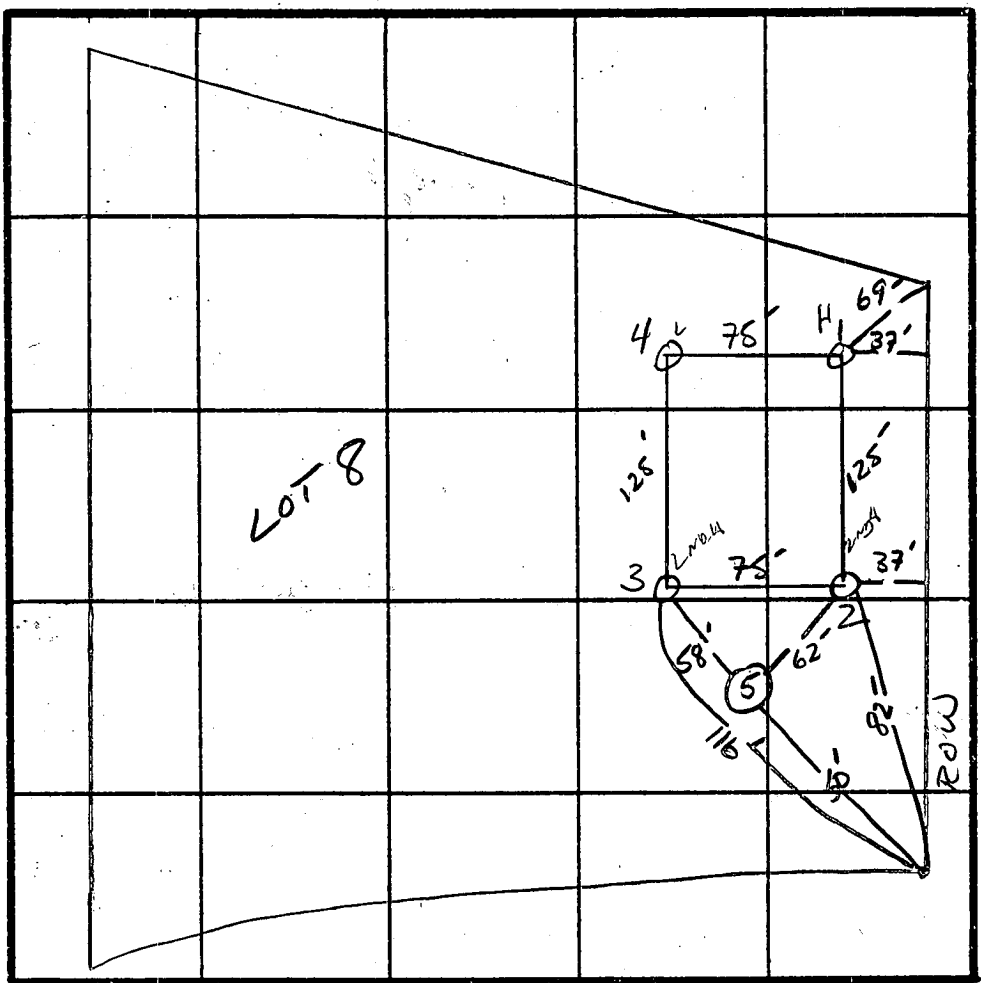
\_\_\_\_\_  
\_\_\_\_\_

## THIS IS NOT A PERMIT



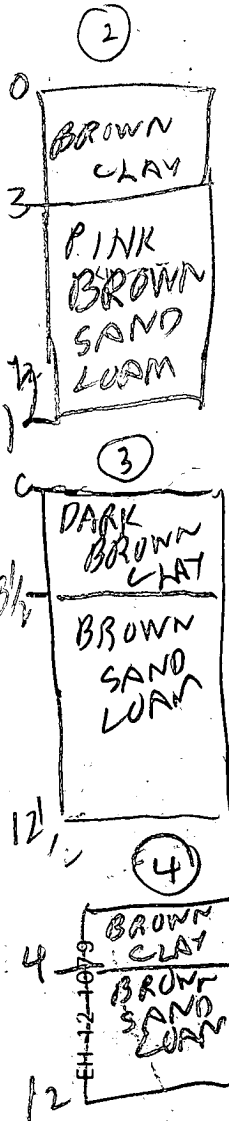
HOLE ELEVATION

- ① = HIGHEST
- ④ = LOWEST
- ② ③ = NEXT HIGH
- ⑤ = NEXT LOW



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Rt 99



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/7/85	1 S	5	1118	1127	1123	1130	7
	1 V	13					
	2 S	5	1120	1121	1121	1125	4
	2 V	12					
	3 S	5	1132	1135	1135	1139	4
	3 V	12 1/2					
	4 V	12	LOOKS OK		BELOW 4 FT		
	5 V	12 1/2	LOOKS OK				

① - 10 125

REMARKS

TYPE OF SOIL

TESTED BY

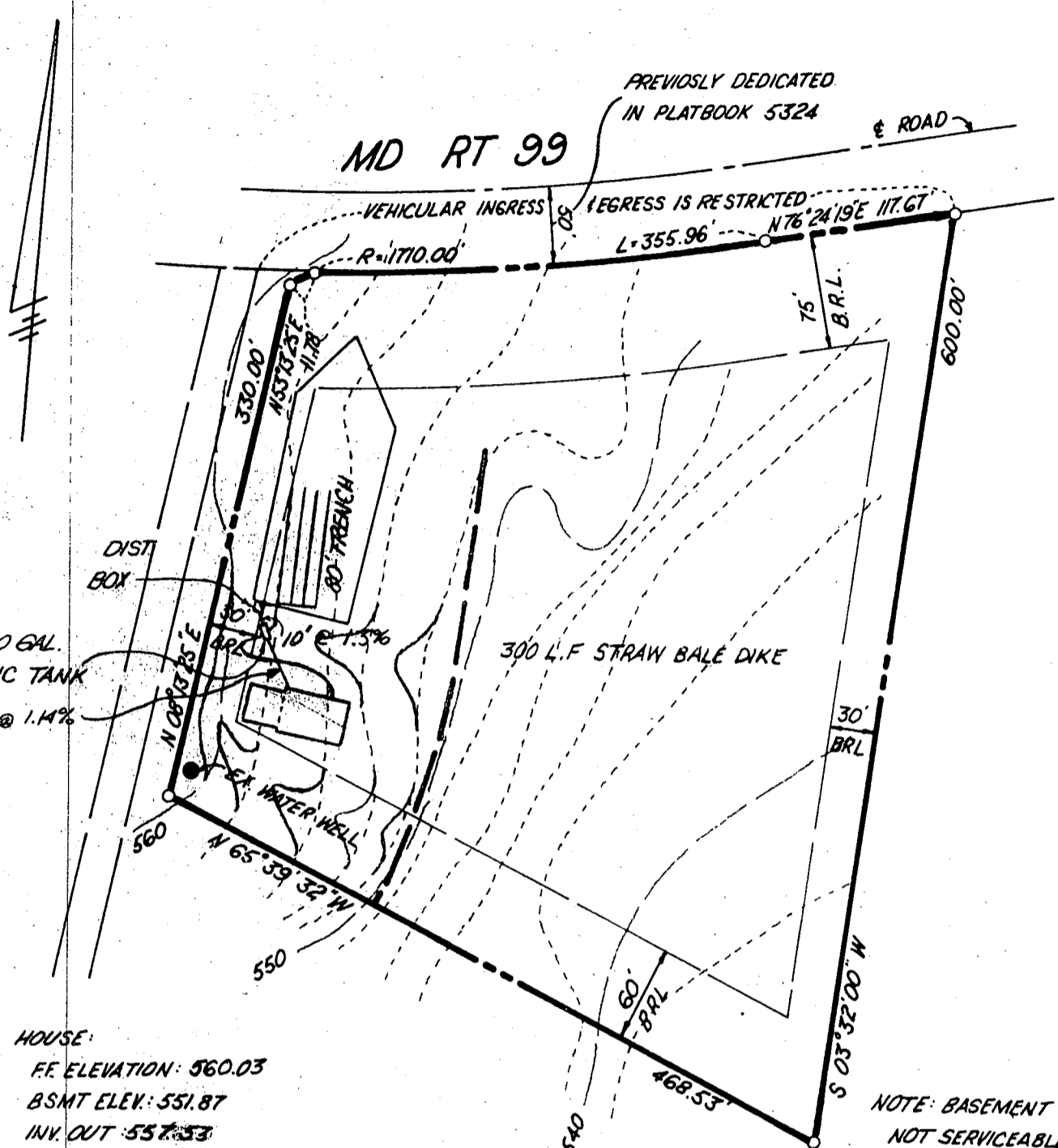
B. HODGES & ASSOC.

Backhoe LARRY, SKIP

ALSO PRESENT

BOSWELL owner





HOUSE:  
 FF ELEVATION: 560.03  
 BSMT ELEV: 551.87  
 INV. OUT: 557.53

SEPTIC TANK:  
 EX. GRADE: 558.00  
 FIN. GRADE: 558.00  
 INV. IN: 555.63  
 INV. OUT: 555.38

DISTRIBUTION BOX:  
 EX. GRADE: 558.70  
 FIN. GRADE: 558.70  
 INV. IN: 555.25  
 INV. OUT: 555.00

TRENCHES:  
 EX. GRADE: 559.00  
 FIN. GRADE: 559.00  
 INV. IN: 555.00

WELL:  
 EX. GRADE: 561.00  
 FIN. GRADE: 561.00

NOTE: BASEMENT NOT SERVICEABLE BY GRAVITY SEWERAGE

8/9/85  
 Sketch OK # 66133  
 F.S. B.P.

B/IH CONTRACTING INC.  
 8231 MAIN ST.  
 ELLICOTT CITY, MD 21043  
 301-465-4714

SUBDIVISION RECORDED  
 IN PLATBOOK 6249

Well 129PM  
 4'-8"

TITLE: <b>GRADING STUDY</b>				
PROJECT: <b>BOSWELL PROPERTY-LOT 8</b>				
LOCATION: <b>3 RD</b> ELECTION DISTRICT <b>HOWARD</b> CO., MD.				
SCALE: 1"=100'	DESIGNED BY: J.J.B.	DRAWN BY: D.R.	CHECKED BY:	DATE: JULY 1985
FIELD BOOK:	PAGE NO.:	JOB NO.: 85172	DRAWING NO.:	

**boender associates**  
 inc.  
 consulting engineers  
 land surveyors  
 land planners

COURTHOUSE SQUARE  
 3565 ELLICOTT MILLS DRIVE  
 ELLICOTT CITY, MD. 21043  
 (301) 465-7777

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER  
WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL  
DRILLER:

My well driller is not to install the pump for my water well, and I  
hereby certify that it will be my responsibility to have a Pump Permit  
taken out by a registered master plumber or certified pump installer.  
It will be my responsibility to notify the Health Department before  
and during the installation so that inspections can be made by their  
representative. (Pursuant to Chapter XVII, of the Plumbing Code of  
Howard County.)

Robert A Herrera  
(Name)

8231 Main St Ellicott City  
(Address)

HO-81-1082  
(OEP Well Permit Number)

6-19-85  
(Date)

B 1 8072

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

HO-81-1082

fill in this form completely

Date Received

01/19/85

OWNER INFORMATION

B & H CONTRACTORS

8231 MAIN ST

ELLICOTT CITY MD 21043

B 3

LOCATION OF WELL

HOWARD

DOSWELL PROP.

SECTION LOT 3

MARLBOROUGH

MILES FROM TOWN (enter 0 if in town) 2.5 MI

DRILLER INFORMATION

Dana Kyker 30 License No. 80

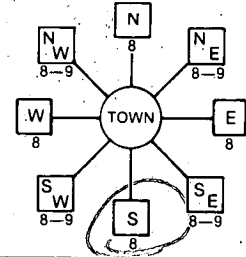
Westminster Rotary Well Drilling, Inc.

P.O. Box #861, Westminster, Md. 21157

Address Signature Date 6/19/85

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11805 Rt. 99

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

325 DISTANCE FROM ROAD

ENTER FT or MI

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 550

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD A34738

COUNTY NAME COUNTY NO. OEP SIGNATURE STATE HEALTH INSERT S

DATE ISSUED 067585 CO SIGNATURE EXP. DATE

NORTH GRID 542000 EAST GRID 0822000

APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)
CABLE REVerse-ROtary DRive-POINT
other

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)

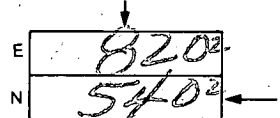
- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEIN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

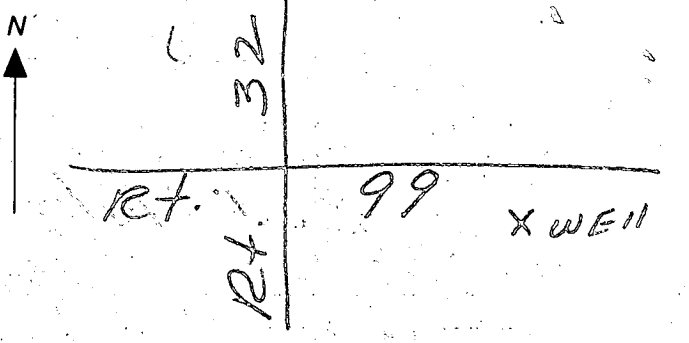
SOURCES OF DRILLING WATER

- 1. City
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE CW INITIALS IN BOX PERMIT No. HO-81-1082

SPECIAL CONDITIONS

COMPLETE THIS APPLICATION AND RETURN ALL PARTS OF THIS FORM INTACT TO THE COUNTY HEALTH DEPARTMENT IN WHICH THE WELLS IS TO BE DRILLED. PRESS FIRMLY FOR FOURTH COPY.

EMERGENCY/TEMP NO. IF ANY

**B 1** 8072 SEQUENCE NO. (OEP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND  
 APPLICATION FOR PERMIT TO DRILL WELL  
 please print or type

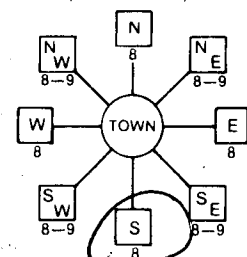
OEP PERMIT NUMBER H0-81-1082  
 fill in this form completely

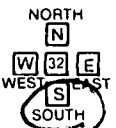
Date Received 3:00 P.M. 7/5/85

**B 2** OWNER INFORMATION  
B & H CONTRACTORS  
 15 Last Name 13 Owner 34 First Name  
8231 MAIN ST  
 36 Street or RFD 55  
ELLICOTT CITY MD 21043  
 57 Town 70 State 72 Zip 76

**B 3** LOCATION OF WELL  
HOWARD  
 8 COUNTY 21  
DOSWELL PROP.  
 23 SUBDIVISION 42  
 SECTION 8 44 46 LOT 8 48 50  
MAR, OTTISW 1/1 E  
 52 NEAREST TOWN 71  
 MILES FROM TOWN (enter 0 if in town) 2.9 MI  
 76 77 78

**B 4** DRILLER INFORMATION  
 Dana Kyker  
 Driller's Name 77 License No. 30 80  
 Westminster Rotary Well Drilling, Inc.  
 Firm Name  
 P.O. Box #861, Westminster, Md. 21157  
 Address  
Dana Fisher 6/19/85  
 Signature Date

**B 4** DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  


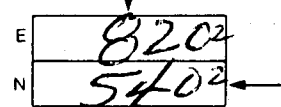
NEAR WHAT ROAD 11745  
4805 RT 99 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
  
 34 325 37 DISTANCE FROM ROAD  
 ENTER FT or MI FT  
 38 39

**B 2** WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) 5 2 8 12  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 550 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)  
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)  
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

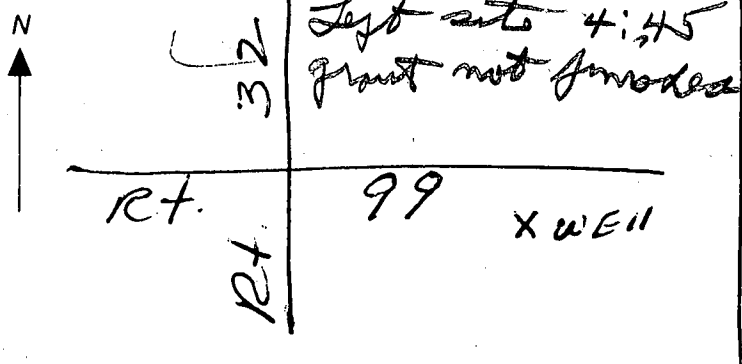
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
HOWARD COUNTY NAME  
A34738 COUNTY NO.  
 OEP SIGNATURE \_\_\_\_\_ STATE HEALTH INSERT S \_\_\_\_\_ 41  
 DATE ISSUED 06 25 85 Craig Wilton 12/25/85  
 43 48 CO SIGNATURE EXP. DATE  
 NORTH GRID 542000 EAST GRID 0822000  
 50 55 57 63

APPROXIMATE DEPTH OF WELL 200 FEET  
 24 28  
 APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER  
 1. CITY  
 2. 7/5/85  
 3. 7/5/85  
 WRITE THE BOX NUMBER FROM THE MAP HERE  


METHOD OF DRILLING (circle one)  
 BORED (or Augered) JETTED Jetted & DRIVEN  
 AIR-ROTARY  AIR-PERCussion  ROTARY (Hydraulic Rotary)  
 CABLE  REVERSE-ROTARY  DRIVE-POINT  
 other \_\_\_\_\_

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY  
 THIS WELL WILL DEEPEAN AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) \_\_\_\_\_ 41 \_\_\_\_\_ 52

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  


Not to be filled in by driller (OEP USE ONLY)  
 APPROP. PERMIT NUMBER \_\_\_\_\_ 54 GAP \_\_\_\_\_ 63  
 FORCE CW WRITE INITIALS IN BOX 67 68 PERMIT No. H0-81-1082  
 70 71 72 73 74 75 76 77 78 79





C1 2340 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A34738

DATE Received

DATE WELL COMPLETED 070585

Depth of Well 175 (TO NEAREST FOOT)

PERMIT NO: FROM "PERMIT TO DRILL WELL" MO-81-1082

OWNER B+N CONTRACTORS (MERRARA) STREET OR RFD 175 ROUTE 99 TOWN MARIOTTVILLE SUBDIVISION BOSWELL PROPERTY SECTION LOT 8

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Rows include Dirt, Soft Brown Mica, Hard Blue & Brown Sandstone, etc.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL CEMENT CM, BENTONITE CLAY BC, NO. OF BAGS 29, NO. OF POUNDS 2726.

CASING RECORD: casing types insert appropriate code below, MAIN CASING TYPE ST, Nominal diameter 6, Total depth 117.

OTHER CASING (if used) diameter inch, depth (feet) from to.

SCREEN RECORD: screen type or open hole insert appropriate code below, SCREEN RECORD ST, BR, HO, PL, OT.

DEPTH (nearest ft.) table with rows for casing height and screen depth.

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED.

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION"

DRILLERS IDENT. NO. 30 Dana Kyker

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR

GRAVEL PACK from 115 to 175 IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ LOG INDICATOR

PUMPING TEST: HOURS PUMPED 3, PUMPING RATE 12, METHOD USED TO MEASURE PUMPING RATE Submersible, TYPE OF PUMP USED S submersible.

PUMP INSTALLED: DRILLER WILL INSTALL PUMP YES (NO), TYPE OF PUMP INSTALLED S, CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH.

